



PATENT

Attorney's Docket No. MP0257

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: Sutardja, Sehat

Group Art Unit: To Be Assigned

Serial No.: 10/693,787

Examiner: To Be Assigned

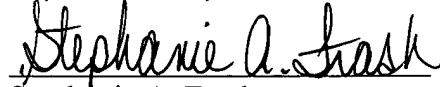
Filed: October 24, 2003

Title: VOLTAGE REGULATOR

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Date: April 22, 2005


Stephanie A. Frash

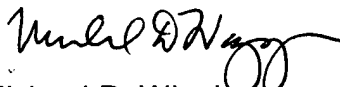
STATUS INQUIRY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Please notify the undersigned of the status of the subject application.

Respectfully submitted,


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Date: April 22, 2005

04-25-05

JFW

PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/693,787
		Filing Date	October 24, 2003
		First Named Inventor	Sutardja, Sehat
		Art Unit	To Be Assigned
		Examiner Name	To Be Assigned
Total Number of Pages in This Submission		Attorney Docket Number	MP0400

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): return receipt postcard
Remarks: The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name	Michael D. Wiggins	Reg. No.	34,754
Signature					
Date	April 22, 2005				

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Typed or printed name	Stephanie A. Frash	Express Mail Label No.	EV570165036US (04/22/05)
Signature		Date	April 22, 2005

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